



**LAKE DON PEDRO
COMMUNITY SERVICES DISTRICT**
9751 Merced Falls Road
La Grange, California 95329
(209) 852-2331 • Fax (209) 852-2268

Application for Employment

Please print or type this application and use blue or black ink.

Position Applying for: _____ Date of Application: _____
Referral Source: _____

Name: (last,middle,first) _____

Address: _____
City: _____ Telephone number: () _____
State: _____

Zip: _____ Are you under the age of 18? Yes ___ No ___

Have you filled out an application with us before? If yes give date: day ___ Month ___ Year ___ Yes ___ No ___

May we contact your Present Employer?..... Yes ___ No ___

Legally eligible to work in the U.S.? Proof or U.S. Citizenship or immigration status is required. Yes ___ No ___

Have you ever been convicted of a Felony in the past 7 years? If yes explain below in detail..... Yes ___ No ___

Date available for work? Day ___ Month ___ Year ___ Willing to relocate?..... Yes ___ No ___

Will you work overtime? Yes ___ No ___ Will you travel if job requires it? Yes ___ No ___

Type of work desired? Full Time ___ Part Time ___ Temporary ___ Seasonal ___ Educational Co-Op ___

Will you be willing to take a pre-employment physical?..... Yes ___ No ___

Have you ever been bonded?..... Yes ___ No ___

Drivers License number (required) _____ State _____ Can you provide a DMV printout? Yes ___ No ___

Please list below the last 3 schools attended starting with the last one. List any diplomas or degrees awarded. List any fields of study that may be relevant to this employment.

	Dates attended	Major/Minor	Diploma/Degree received

Do you have any special skills, classes, licenses or certifications that may be relevant to the position that you are applying for? Please list in detail below.

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EMPLOYMENT HISTORY

Please list all employment, volunteer work, military or assignments that you have had in the last 10 years. Starting with the most recent. Explain any gaps in employment in the comments section. Below

Employer	Dates Employed	Description of duties, work performed, projects completed and accomplishments
Address	Starting and Ending Salary	
Job Title		
Supervisor and Supervisor's Phone Number	Personnel Supervised	
Reason For Leaving		
May we contact them for reference? Yes ___ No ___		

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Personal References: Do not include previous employers or relatives

Name	Address	Phone Number

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. Furthermore, I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Employer is an equal opportunity employer. The employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only (60) days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to fill out a new application.

Signature of Applicant: _____ Date: _____